

## DECLARATION FOR "371" APPLICATION

**COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY**ATTORNEY'S DOCKET  
PG3733USWFirst Names Inventor:  
Stephen Anthony  
BURBIDGE**Complete if known:**  
App No.:

Filing Date

Group Art Unit:

( ) Declaration submitted with initial filing or

( ) Declaration submitted after initial filing (surcharge required 37CFR1.16(e))

As below named inventor. I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**NEW USES FOR POTASSIUM CHANNEL OPENERS**

the specification of which (check only one item below):

[ ] is attached hereto.

OR

[ x ] was filed on **30 June 2000** as United States application Serial No. \_\_\_\_\_ or PCT InternationalApplication Number **PCT/GB00/02516** filed and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35, U.S.C. §119 (a)-(d) or §365(b) of any foreign applications(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:

**PRIOR FOREIGN AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:**

Prior Foreign Application Number (s)	Country	Foreign Filing Date (MM/DD/YYYY)	PRIORITY CLAIMED
1 9915414.8	GB	July 1, 1999	X
2.			
3.			
4.			
5.			

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date (MM/DD/YYYY)
1.	
2.	
3.	
4.	

## ARATION FOR "371" APPLICATION

**COMBINED DECLARATION FOR UTILITY or DESIGN  
PATENT APPLICATION WITH POWER OF ATTORNEY** ContinuedATTORNEY'S DOCKET NUMBER  
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**PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION**

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	STATUS (Check one)		
		PATENTED	PENDING	ABANDONED

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Send Correspondence to:

Direct Telephone Calls to:

Bonnie Deppenbrock  
919-483-1577

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

1-00	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>BURBIDGE</b>	<b>Stephen</b>	<b>Anthony</b>
	INVENTOR'S SIGNATURE	Signature		Date:
		X <i>Stephen Burbidge</i>		X 19.12.2001
1	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Stevenage</b>	<b>GB</b>	<b>GB</b>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		<b>GlaxoSmithKline Five Moore Drive</b>	<b>Research Triangle Park</b>	<b>North Carolina 27709, US NC</b>
2-00	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>CLARE</b>	<b>Jeffrey</b>	<b>John</b>
	INVENTOR'S SIGNATURE	Signature		Date:
		X		X
2	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Stevenage</b>	<b>GB</b>	<b>GB</b>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		<b>GlaxoSmithKline Five Moore Drive</b>	<b>Research Triangle Park</b>	<b>North Carolina 27709, US NC</b>
3-00	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>COX</b>	<b>Brian</b>	
	INVENTOR'S SIGNATURE	Signature		Date:
		X		X
3	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Stevenage</b>	<b>GB</b>	<b>GB</b>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		<b>GlaxoSmithKline Five Moore Drive</b>	<b>Research Triangle Park</b>	<b>North Carolina 27709, US NC</b>
4-00	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>DUPERE</b>	<b>Joseph</b>	
	INVENTOR'S SIGNATURE	Signature		Date:
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Cranfield</b>	<b>GB</b>	<b>GB</b>

## DECLARATION FOR "371" APPLICATION

4	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 East Road Whorley End	CITY Cranfield	STATE & ZIP CODE/COUNTRY Bedfordshire MK43 0TD, GB
2	FULL NAME OF INVENTOR	FAMILY NAME HAGAN	FIRST GIVEN NAME Russell	SECOND GIVEN NAME/INITIAL Michael
5-50	INVENTOR'S SIGNATURE	Signature X <i>Russell</i>		Date: X 19th December 2001
0	RESIDENCE & CITIZENSHIP	CITY Durham	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
5	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY North Carolina 27709, US NC
2	FULL NAME OF INVENTOR	FAMILY NAME XIE	FIRST GIVEN NAME Xinmin	SECOND GIVEN NAME/INITIAL
6-00	INVENTOR'S SIGNATURE	Signature		Date:
0	RESIDENCE & CITIZENSHIP	CITY Burlingame	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
6	POST OFFICE ADDRESS	POST OFFICE ADDRESS 2633 Martinez Drive	CITY Burlingame	STATE & ZIP CODE/COUNTRY California 94010, US CA

# COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

 ATTORNEY'S DOCKET NUMBER  
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919-483-1577

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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>BURBIDGE</b>	<b>Stephen</b>	<b>Anthony</b>
0	INVENTOR'S SIGNATURE	Signature X		Date: X
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Stevenage</b>	<b>GB</b>	<b>GB</b>
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		<b>GlaxoSmithKline Five Moore Drive</b>	<b>Research Triangle Park</b>	<b>North Carolina 27709, US</b>
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		<b>CLARE</b>	<b>Jeffrey</b>	<b>John</b>
0	INVENTOR'S SIGNATURE	Signature X		Date: X 19/12/01
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Stevenage</b>	<b>GB</b>	<b>GB</b>
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		<b>COX</b>	<b>Brian</b>	
0	INVENTOR'S SIGNATURE	Signature X		Date: X
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>DUPERE</b>	<b>Joseph</b>	
0	INVENTOR'S SIGNATURE	Signature		Date:
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Cranfield</b>	<b>GB</b>	<b>GB</b>

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**COMBINED DECLARATION FOR UTILITY or DESIGN  
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>BURBIDGE</b>	<b>Stephen</b>	<b>Anthony</b>
0	INVENTOR'S SIGNATURE	Signature		Date:
1	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Stevenage</b>	<b>GB</b>	<b>GB</b>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		<b>GlaxoSmithKline Five Moore Drive</b>	<b>Research Triangle Park</b>	<b>North Carolina 27709, US</b>
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>CLARE</b>	<b>Jeffrey</b>	<b>John</b>
0	INVENTOR'S SIGNATURE	Signature		Date:
2	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Stevenage</b>	<b>GB</b>	<b>GB</b>
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		<b>COX</b>	<b>Brian</b>	
0	INVENTOR'S SIGNATURE	Signature		Date:
				<i>19th December 2001</i>
3	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		<b>Stevenage</b>	<b>GB</b>	<b>GB</b>
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2	FULL NAME OF INVENTOR	FAMILY NAME <b>HAGAN</b>	FIRST GIVEN NAME <b>Russell</b>	SECOND GIVEN NAME/INITIAL <b>Michael</b>
0	INVENTOR'S SIGNATURE	Signature		Date:
5	RESIDENCE & CITIZENSHIP	CITY <b>Durham</b>	STATE OR FOREIGN COUNTRY <b>US</b>	COUNTRY OF CITIZENSHIP <b>GB</b>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>GlaxoSmithKline Five Moore Drive</b>	CITY <b>Research Triangle Park</b>	STATE & ZIP CODE/COUNTRY <b>North Carolina 27709, US</b>
2	FULL NAME OF INVENTOR	FAMILY NAME <b>XIE</b>	FIRST GIVEN NAME <b>Xinmin</b>	SECOND GIVEN NAME/INITIAL
0	INVENTOR'S SIGNATURE	Signature <i>Xin Xie</i>		Date: <i>15/1/2002</i>
	RESIDENCE & CITIZENSHIP	CITY <b>Burlingame</b>	STATE OR FOREIGN COUNTRY <b>US</b>	COUNTRY OF CITIZENSHIP <b>GB</b>
6	POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>2633 Martinez Drive</b>	CITY <b>Burlingame</b>	STATE & ZIP CODE/COUNTRY <b>California 94010, US</b>

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